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INTERE UNITED STATES PATENT AND TRADEMARK OFFICE

Appl. No.

10/086,183

Confirmation

8214

No.:

Applicant

Christer O. Andreasson et al.

Filing Date

02/26/2002

Title

Systems And Methods For Tracking Pharmaceuticals Within

A Facility

Group Art Unit

: 2636

Examiner

Julie Bichngoc Lieu

Docket No.

706737.38

Customer No.:

34313

Mail Stop Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

AMENDMENT TRANSMITTAL

Transmitted herewith is an amendment in the above-identified application in connection with the Office Action dated January 10, 2005.

Applicant hereby petitions for an extension of time under 37 CFR § 1.136 [fees: 37 CFR § 1.17(a)(1)-(5)] for the total number of months checked below:

EXTENSION	FEE FOR SMALL	FEE FOR OTHER THAN		
(months)	ENTITY	SMALL ENTITY		
one month	\$60.00	\$120.00		
two montl	ns \$225.00	\$450.00		
igtimes three mon	ths \$510.00	\$1,020.00		
07/06/2005 GWDRDDF1 00000007 150665 100861	83	Fee \$510.00		
01 FC:2253 510.00 DA				

CERTIFICATE OF MAILING 37 CFR §1.8

I hereby certify, pursuant to 37 CFR §1.8, that I have reasonable basis to expect that that this paper or fee (along with any referred to as being attached or enclosed) would be mailed or transmitted on or before the date indicated with the United States Postal Service with sufficient postage as first class mail on the date shown below in an envelope addressed to the Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

Dated:

June 29, 2005

DOCSOC1:164665.1

Jodie Davis

Applicant

ant

Christer O. Andreasson et al.

Appl. No.

10/086,183

Examiner

Julie Bichngoc Lieu

Docket No.

706737.38

If an additional extension of time is required, please consider this a petition therefor.

Fee Calculation: TOTAL AMOUNT OF PAYMENT: \$510.00

A. The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to Deposit Account No. <u>15-0665</u>.

Charge any additional fee required under 37 CFR 1.16 and 1.17 to Deposit Account No. <u>15-0665</u>.

Total Claims	51	•	51	=	0	x	\$50.00	\$0.00
Independent Claims	6	-	6	=	0	x	\$200.00	\$0.00
Application Size Fee (\$250 for each additional 50 sheets or fraction thereof)	200	•	100	=	100	х	250.00	\$0.00
Multiple Dependent Claims	\$360	(if	applica	able)				\$0.00
Surcharge 37 CFR § 1.16(e)	\$130	(if	applica	\$0.00				
TOTAL OF ABOVE CALCULATIONS								
Reduction by ½ for Filing by S	mall Entit	ty. N	ote 37	CFR	§§ 1.9,	1.27	, 1.28.	\$0.00
Extension of Time (from above)								
Assignment - \$40 (if applicab	\$0.00							
TOTAL FEES SUBMITTED HEREWITH							\$510.00	

Enclosing Declaration of Christer O. Andreasson and Jimmy C. Caputo Under 37 C.F.R. §1.131 and Exhibits 1 through 24.

Respectfully submitted,

Dated: June 29, 2005

By: Samuel B. Stone

Reg. No. 19,297

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Customer Number: 34313